# PROTOCOL FOR THE PREVENTION, DETECTION AND MANAGEMENT OF SUICIDAL OR SELF-HARM RISK

## ESDI - ESCOLA SUPERIOR DE DISSENY

Versió 1.0

# JUSTIFICATION

Suicidal behaviour and self-harming behaviours, with or without suicidal intent, constitute a **public health and emotional well-being issue** of great social and educational relevance. The World Health Organization (WHO) indicates that suicide is one of the leading causes of death among young people, and that associated risk factors —emotional disorders, isolation, academic pressure, or situations of personal vulnerability— often emerge or intensify during the educational stage.

**ESDI – Escola Superior de Disseny**, as a higher education institution committed to the holistic development of individuals, **recognizes its institutional and ethical responsibility in preventing and addressing situations of severe emotional risk** within its educational community.

This commitment stems from the conviction that **the psychological, social, and academic well-being of students is an essential condition for their learning, development, and personal and professional success.**

This reality requires higher education institutions to adopt **preventive action protocols, early identification mechanisms, and responsible intervention procedures** in response to any suspicion or evidence of suicidal or self-harming risk, always ensuring the protection and dignity of the affected individuals, as well as the safety of the community.

ESDI, as a university school affiliated with **Ramon Llull University**, assumes this challenge with the intention of **establishing its own framework of action, adapted to its organizational structure, size, and institutional culture**, and aligned with the principles of prevention, care, and social co-responsibility that guide the school's academic activity.

This protocol is aligned with the international recommendations of the WHO and with the guidelines of the **Suicide Prevention Plan of Catalonia (PLAPRESC)**, as well as with the orientations of the Ministry of Universities and the Department of Education regarding the promotion of mental health in the educational sphere.

# PURPOSE OF THE PROTOCOL

This **Protocol for the prevention, detection, and management of suicidal or self-harming risk at ESDI** aims to:

1. **Prevent, detect, and act immediately and in a coordinated manner** in the face of potential situations of suicidal or self-harming risk affecting any member of the educational community, especially students.

2. **Establish clear guidelines for action and communication** that enable a swift, responsible, and respectful response toward the affected person and their environment.

3. **Ensure the protection and safety of individuals**, always prioritizing their physical and emotional integrity, and guaranteeing referral to healthcare or specialized services when necessary.

4. **Coordinate intervention among the different agents involved** —teaching staff, academic coordination, academic management, and the Student Support and Guidance Service— by defining roles and responsibilities for each phase of the procedure.

5. **Promote a culture of prevention, awareness, and emotional care** within the ESDI community, fostering an educational environment based on respect, trust, and inclusion.

6. **Contribute to the destigmatization of emotional distress and mental health issues**, encouraging help-seeking and accompaniment as part of a healthy and responsible educational culture.

## GUIDING PRINCIPLES

The protocol is based on the following principles:

- **Prevention and early detection**: promoting the identification of risk situations before they escalate into severe crises.
- **Speed and effectiveness in response**: when facing a risk situation, action must be immediate and proportional to the level of severity.
- **Institutional coordination**: ensuring a collective, organized, and coherent response among the different ESDI agents.
- **Confidentiality and respect for privacy**: always safeguarding the affected person's privacy and managing information with the highest level of rigor.
- **Support and follow-up**: ensuring appropriate ongoing care that facilitates recovery and academic and personal reintegration.
- **Training and awareness**: providing staff and students with the resources needed to recognize and appropriately manage risk situations.
- **Community care**: understanding suicide prevention as a shared responsibility across the entire educational community.

# SCOPE OF APPLICATION AND INSTITUTIONAL STRUCTURE OF THE PROTOCOL

## 1. SCOPE OF APPLICATION

This protocol applies to **the entire educational community of ESDI – Escola Superior de Disseny**, regardless of academic, contractual, or functional affiliation. It includes:

- **Students** enrolled in all undergraduate, master's, vocational, or other institutional programs offered by ESDI.
- **Teaching staff**, including permanent faculty, collaborators, and visiting lecturers.
- **Administrative, technical, and service personnel**.
- **Other individuals temporarily linked to ESDI**, such as interns, researchers, or participants in collaboration projects, provided that the risk situation occurs within the institution's activity or spaces.

The protocol applies to **any situation or indication of suicidal or self-harming risk detected within ESDI's educational or relational environment**, as well as cases occurring outside the center that have a direct connection to the student's academic life or training activity.

## 2. SCOPE AND NATURE

This document is **preventive, guiding, and intended for immediate intervention**. It is not a medical or clinical instrument, but an **institutional guide for response and referral** that enables activation of the appropriate channels to ensure the safety and support of the affected person.

The protocol **does not replace** the **competencies of emergency, healthcare, or public health services**; rather, **it complements their work** by ensuring an initial, orderly, coordinated, and respectful response within the educational environment.

## 3. INSTITUCIONAL STRUCTURE AND INVOLVED AGENTS

Proper implementation of the protocol requires the **involvement and coordination of various agents** within the ESDI educational community. These agents, with clearly defined roles, form the **institutional intervention network** in risk situations.

a) <u>General Management and Academic Management</u>

i) Hold **institutional responsibility** for ensuring proper implementation of the protocol and authorizing communication with external services or families when necessary.

ii) Coordinate general actions and ensure **compliance with confidentiality, safety, and procedural rigor.**

iii) In cases of severe or imminent risk, they may **directly activate emergency services** (112 or 061) and implement immediate protection measures.

b) Academic Coordination

i) Serves as the **main contact point** between students and Academic Management.

ii) Receives and manages initial notifications of potential risk cases.

iii) Assists in assessing the situation and, if necessary, activates referral to the Student Support and Guidance Service.

iv) Ensures **academic follow-up and communication with teaching staff** if adjustments to activities or schedules are required for mental health reasons.

c) Student Support and Guidance Service

i) Acts as the **technical reference body** for the protocol within ESDI.

ii) Provides **care, guidance, and professional referral** for students or staff showing signs of emotional, suicidal, or self-harming risk.

iii) Maintains contact with **external healthcare and psychological services** and **conducts follow-up** with the affected person's consent.

iv) Participates in **training and awareness** initiatives related to emotional well-being and suicide prevention.

d) Teaching Staff

i) Plays a **key role in early detection** due to their continuous interaction with students.

ii) Must **immediately report** any concerning signs to Academic Coordination.

iii) Should not attempt clinical intervention but must **activate the institutional protocol.**

iv) Must ensure that the affected person is not left alone until appropriate help arrives.

e) Administrative and Service Staff

i) May detect risk situations in non-teaching spaces or daily interactions.

ii) Must report any suspicion **immediately and confidentiall**y to Academic Coordination.

iii) Does not participate directly in assessment or intervention but **may provide logistical or administrative support** when required.

f) Students and peers

i) Any student may report observed risk situations involving a peer.

ii) Such communication is considered an **act of responsibility and community care**, without negative consequences.

iii) ESDI guarantees that all good-faith reports will be treated with **respect, sensitivity, and confidentiality**.

# 4. WELL-BEING AND EMOTIONAL HEALTH REFERENCE PERSON

To centralize information and ensure personalized follow-up, ESDI will designate a **reference person for well-being and emotional health**. Their functions include:

- **Coordinating and monitoring** detected or referred cases.
- **Advising and supporting** Academic Management in applying the protocol.
- **Managing communication with external services or families** when necessary and with informed consent.
- **Recording** actions and case outcomes **with full confidentiality guarantees**.
- **Promoting prevention and awareness initiatives** for the entire educational community.

# PROCEDURE FOR RESPONSE

This chapter establishes the **phases of action in response to a possible situation of suicidal or self-harm risk** detected within the scope of ESDI. The procedure has been designed to ensure an **immediate, safe, and coordinated response**, always prioritizing the protection of the affected person and collective safety.

## A) DETECTION AND IDENTIFICATION OF RISK

The process begins when **any member of the educational community** —faculty, students, staff, or management— detects signs that a person may be experiencing **severe emotional distress or suicidal risk.**

These signs may include:

- Direct or indirect comments about death, hopelessness, or lack of purpose.
- Sudden changes in behavior, class attendance, or academic performance.
- Verbal, written, or visual expressions with self-harming content.
- Social withdrawal or sudden disengagement from academic activities.
- Information shared by concerned peers or family members.

**Any sign must be considered relevant**. A formal diagnosis is not required to activate the protocol; a **reasonable suspicion** is sufficient.

## B) IMMEDIATE COMMUNICATION AND FIRST RESPONSE

When a potential risk situation is detected:

1. **The student or staff member** who identifies it **must inform immediately the Academic Coordination**.

2. Communication should be **verbal and, if possible, also by email**, describing the observed facts objectively and without value judgments.

3. If the risk is **severe or imminent**, **emergency services (112) must be contacted** without delay.

4. The affected person **must not be left alone** until help arrives.

5. **Academic or General Management from ESDI** must also be informed to activate institutional support and communication with external services or family.

## C) INITIAL ASSESSMENT AND ACTIVATION OF THE PROTOCOL

Once notified, Academic Coordination and Academic Management will conduct an **initial assessment** to determine the level of risk and appropriate measures.

Three levels are distinguished:

| Risk level | Description | Immediate actions |
|---|---|---|
| **High (imminent risk)** | The person expresses suicidal intentions or plans, or there are clear signs of danger to their physical integrity. | Immediate activation of 112; notification to Academic Management; protection of the person; contact with family or external services. |
| **Medium (probable risk)** | The person expresses suicidal ideation or shows recent self-harming behaviors, but without immediate danger. | Urgent interview with the Support Service; initial psychological assessment; referral to specialized services; close monitoring. |
| **Low (potential risk or emotional distress)** | Significant psychological distress or signs of isolation or demotivation are detected. | Contact with the Support Service; emotional support; periodic monitoring; preventive measures. |

All assessments will be documented **confidentially**.

## D) COMMUNICATION AND CONFIDENTIALITY

Information related to suicidal or self-harming risk must be handled with **strict discretion and respect for privacy.**

- Only individuals directly involved in the intervention may access the information.
- Information cannot be shared outside authorized channels.
- If it is necessary to inform the family or legal guardians, the **Academic Management** will do so in a **deliberate, empathetic and professional** manner, always ensuring the student's **informed consent**, except in situations of immediate risk to life, where **the right to protection of life takes precedence**.

## E) REFERRAL AND EXTERNAL SUPPORT

When specialized psychological or medical care is required, the Support Service will manage **referral to public mental health services** or other appropriate resources.

With the student's consent, ESDI may maintain **coordination contact** with these services to ensure continuity of care. The school does not provide clinical treatment but does offer **educational support and accompaniment** throughout the process.

## F) INSTITUTIONAL FOLLOW-UP

After the initial phase, the Support Service and Academic Coordination will conduct **personalized follow-up** to:

- Assess emotional and academic progress.

- Provide flexibility or adaptations if needed.
- Prevent isolation or stigma.
- Ensure a **safe and gradual return** to academic life.

Monitoring must be carried out at **intervals defined according to the case** and will be considered closed when the Guidance Service determines that the situation is stabilized and there is no apparent risk.

## G) POST-CRISIS ACTION AND CASE CLOSURE

After a critical situation or referral due to severe risk, ESDI will implement **post-crisis measures** aimed at repair, institutional reflection, and future prevention. These may include:

- Coordination meetings between Management, the Student Support Service, and involved faculty to **evaluate case management**.

- Review of the protocol, if necessary, to introduce improvements.

- **Emotional support for the class group or teaching staff** if the situation has affected the collective dynamic.

- Ensuring the **affected person's return or reintegration** with full academic inclusion, always with respect and discretion.

The case will be considered **closed** when the designated Well-being and Emotional Health Officer prepares an **internal closure** report detailing the actions taken, preserving confidentiality and eliminating unnecessary information.

# PREVENTION, AWARENESS, AND TRAINING OF THE EDUCATIONAL COMMUNITY

## 1. INSTITUTIONAL COMMITMENT TO PREVENTION

ESDI understands the **prevention of suicidal and self-harm risk** not only as a response to isolated situations, but as a **collective and structural responsibility** that forms part of its institutional culture.

Prevention must be conceived as a continuous process that **integrates the promotion of emotional well-being, early detection, and the reduction of stigma associated with mental health issues.**

In this regard, ESDI commits to:

- Promoting an **educational culture based on care, inclusion, and mutual respect**, where seeking help is normalized and valued.
- Incorporating **emotional well-being as a cross-cutting axis** in its student support policies and faculty development.
- Implementing **training activities and awareness campaigns** that contribute to the detection and prevention of risk situations.
- Ensuring that **all members of the educational community** (faculty, staff, and students) have access to the information and resources needed to act responsibly and safely.

## 2. GENERAL PREVENTIVE ACTIONS

Each year, the **Student Support Service** will design a **preventive action plan** with the following objectives:

1. **Raise awareness** about the importance of mental health and emotional well-being.
2. **Make visible** the internal and external psychological support and emergency resources available.
3. **Normalize dialogue** about emotional distress and risk factors.
4. **Strengthen community bonds** by fostering spaces of trust and peer support.

This plan may include:

- Informational campaigns (posters, internal communications, institutional social media).
- Workshops or seminars on emotional management, self-care, and academic stress.
- Specific actions during **exam periods, final presentations, or other high-stress moments**.
- Collaborations with **psychologists, social organizations, or mental health services**.

## 3. TRAINING AND CAPACITY-BUILDING FOR FACULTY AND STAFF

Faculty and administrative staff play a key role in early detection and initial management of risk situations. For this reason, ESDI will ensure **periodic and updated training** on:

- Identifying signs of suicidal or self-harm risk.
- Empathic communication and emotional management in educational contexts.
- The procedure for activating the protocol and referral pathways.
- Strategies for providing emotional support to students within the educator's role.

Training may be offered in person or online and will be integrated into **ESDI's Staff Training Plan** or delivered through specific sessions organized by the Student Support Service.

# 4. STUDENT PARTICIPATION AND PEER SUPPORT CULTURE

Student involvement is essential to building a **culture of support, empathy, and solidarity** within ESDI. Therefore, the protocol encourages the creation of initiatives and peer-support programs such as:

- **"Peer Mentors" or "Student Support Companions,"** trained to identify warning signs and refer risk situations appropriately.

- Collaborative activities that promote emotional well-being, cohesion, and respect for diversity.

- Dialogue spaces and student-led initiatives focused on mental health and community care.

These initiatives, supervised by the Student Support Service, help **empower students** as active participants in preventing emotional distress and promoting well-being.

# 5. ONGOING COMMUNICATION AND AWARENESS

ESDI will ensure that information about this protocol and available resources is **easily accessible** to the entire educational community through:

- The **institutional website** and internal communication platforms (Classlife or equivalent).
- Physical information points within the school (posters, bulletin boards, QR codes).
- Periodic dissemination through newsletters or official communications.

Additionally, ESDI will ensure that **communication regarding real cases or incidents** related to suicidal or self-harm risk is always handled **ethically, empathetically, and without sensationalism**, following WHO recommendations and responsible communication guidelines on suicide.

# 6. REVIEW AND UPDATE OF THE PROTOCOL

Each year, the Legal Services and Academic Quality Department and the Student Support Service will jointly review the implementation of the protocol to:

- Evaluate its effectiveness and identify areas for improvement.
- Incorporate new recommendations or public mental health protocols.
- Update contact information for internal and external services.
- Prepare an **internal review report** as a tool for evaluation and institutional transparency.

This continuous review process ensures that the protocol **remains active, useful, and up-to-date** in response to the evolving challenges of emotional well-being in higher education

# COORDINATION WITH EXTERNAL SERVICES AND EMERGENCY RESOURCES

## 1. GENERAL PRINCIPLES OF COORDINATION

The prevention and management of suicidal or self-harm risk require **active collaboration between ESDI and public health, emergency, and civil protection services**. ESDI's institutional intervention **does not replace** the clinical or assistance functions of specialized health or psychological services; rather, it **complements them through** early detection, effective communication, and educational follow-up.

To ensure coherence and safety, coordination efforts will follow these principles:

- **Safety and rapid response**
- **Respect for confidentiality and personal data protection**
- **Proportionality and prudence when sharing sensitive information**
- **Institutional collaboration and continuity of support**

## 2. ACTIVATION OF EMERGENCY SERVICES

In situations of **imminent life-threatening risk** (danger to the person's life or physical integrity), **emergency number 112** must be activated immediately, clearly stating:

- That it is a **potential case of suicidal or self-harm risk** within an educational institution.
- The **exact address** of ESDI and the location of the affected person.
- The **name and role** of the person making the call.
- The **observed conditions** and protective measures already taken (e.g., the person is not alone, responsible staff are present).

Simultaneously, **Academic Management** and **Academic Coordination** must be informed so they can manage institutional support and communication with family members or legal guardians. Under no circumstances should the affected person be left alone or moved without professional authorization or supervision.

## 3. REFERRAL TO HEATH OR PSYCHOLOGICAL

When the risk is not imminent but still significant, the **Student Support Service** will arrange a **formal referral to public mental health services** or other specialized resources.

Referral will be carried out with the **informed consent of the affected person** or, in the case of minors, their **legal guardians**. With explicit authorization, the Student Support Service may

provide **contextual academic or behavioural information** to healthcare professionals, always within legal limits of confidentiality and data protection.

## 4. COORDINATION WITH FAMILY OR REFERENCE PERSON

When appropriate—and respecting the affected person's privacy and wishes—ESDI may contact their **family, legal guardians, or designated reference persons** to:

- Inform them about the risk situation or referral.
- Recommend seeking urgent medical or psychological care.
- Provide guidance on available resources.

Communication with the family **will be carried out empathetically, confidentially, and respectfully**, avoiding unnecessary alarm or intrusion into the student's privacy.

In cases of **severe risk or life-threatening emergencies**, family notification **may occur without prior consent**, following the **principle of protection of life** established in Article 6.1.d of the General Data Protection Regulation (EU) 2016/679 (RGPD).

## 5. COOPERATION WITH PUBLIC SERVICES AND SPECIALIZED ENTITIES

ESDI will establish cooperative relationships with **public services and specialized organizations** in mental health, emergency response, and suicide prevention, with the aim of:

- Improving **referral pathways and shared follow-up**.
- Receiving **technical guidance or specialized training** for faculty and staff.
- Participating in **prevention programs or networks** promoted by the Government of Catalonia or local institutions.

## 6. RECORD-KEEPING, DOCUMENTATION AND DATA

To ensure transparency and institutional rigor, ESDI will maintain an **internal record of cases** managed under this protocol, containing only the essential information needed for case management and evaluation.

This record will be managed exclusively by the **Student Support Service** and supervised by the **designated well-being and emotional health officer**, with the following guarantees:

- Information will be kept only for the strictly necessary period.
- Access will be restricted to authorized personnel.
- Data will be securely deleted once the case is closed, or the legal retention period has expired.
- Full compliance with the **General Data Protection Regulation (EU 2016/679) and the Spanish Organic Law 3/2018 on personal data protection and digital rights.**

# FINAL PROVISIONS

## 1. NATURALESA I ABAST DEL PROTOCOL

This protocol is an **internal instrument of a preventive, guiding, and institutional nature**, applicable to the entire ESDI educational community. It does not have a disciplinary purpose, nor does it replace the action protocols of public institutions. Instead, it **establishes the internal procedures that the school will adopt to protect the health, safety, and well-being** of all its members.

Compliance with this protocol is **mandatory** for all teaching, administrative, technical, and service staff, as well as for any other person linked to the institution who may be involved in a risk situation.

## 2. ENTRY INTO FORCE

This protocol enters into force the day after its approval by ESDI's Academic Management and will be immediately applicable to all programs and activities of the institution. Its dissemination will be carried out publicly through the institutional website and internal communication channels.

# ANNEX I. STUDENT AUTHORIZATIONN FORM FROM INFORMATION SHARING WITH THIRD PARTIES

**Name and surname of the student:**
**Program / Course:**

- On my own behalf
- As a legal guardian or representative

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- I authorise the sharing of information with third parties
- I do not authorise the sharing of information with third parties

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***Regarding my immediate environment (family, partner, emergency contact):***

- I authorize them to be informed
- I do not authorize them to be informed

Name:

Contact:

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***Regarding other members of the educational community (faculty):***

- I authorize them to be informed
- I do not authorize them to be informed

***Regarding the class representative:***

- I authorize them to be informed
- I do not authorize them to be informed

***(If applicable) Regarding residence hall staff:***

- I authorize them to be informed
- I do not authorize them to be informed

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**Data Protection Notice**
We inform you that the Fundació del Disseny Tèxtil, as the data controller, will process your data for the purpose of managing the student support service provided by ESDI and to inform the emergency contact designated by the student in situations involving risk to their health, safety, and/or well-being.
The data subject may exercise their rights of access, rectification, and erasure of personal data, as well as request the restriction of processing, object to processing, request data portability, and avoid automated individual decisions, where applicable. Consent may be withdrawn at any time by contacting the Data Protection Officer at: rgpd@esdi.edu.es.

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Date: Signature:

# ANNEX II. REINTEGRATION PLAN AFTER INTERVENTION BY HEALTH SERVICES FOR SELF-HARM OR A SUICIDE ATTEMPT

**Communication following an attempt**
If it has occurred on or off school premises but has become public knowledge.

1. Contact the family and the pupil:

   - ❖ Express concern and offer help.
   - ❖ Ask what information can be passed on to the teaching staff and pupils at the school.
   - ❖ Inform the family and the pupil of what the teaching staff and other pupils know, in case rumours are circulating.
   - ❖ Ask if the pupil is already receiving professional help or has an appointment scheduled. If not, offer information and support to help arrange this.
   - ❖ Find out what the family and the pupil expect from the school and make it very clear what is and is not possible.
   - ❖ If it is deemed necessary to share information with the teaching staff, the rest of the class and the wider school community, agree on the details.
   - ❖ Inform them about how the school will provide follow-up.

2. Communication with the teaching staff and with the student:

   - ❖ Only if deemed appropriate, and with the consent of the pupil and their family, should information about what happened be passed on to the teaching staff and/or the pupils involved (if they do not consent, make it clear where they can get support and who they can talk to, if they need to). Communication after an attempt should focus on:

     - ➢ Counter rumours. Make it clear that rumours are hurtful. They will be asked to limit themselves, both in person and via social media and new technologies, to the official and truthful information provided, and to be instructed on what types of information should be avoided and what is beneficial.

     - ➢ Provide information on the basics of suicidal behaviour:
       - Suicide is complex and is not caused by a single factor.
       - Suicide is not the only choice when faced with problems, nor is it a heroic or romantic act.
       - There is a link between mental health problems and suicidal behaviour (for example, depression or alcohol misuse), without stigmatising these problems.
       - Suicide is preventable and help is available. The best thing to do is to ask for help.

- ➢ Communication and interaction with pupils
    - Communication with pupils should be clear and empathetic. It will be necessary to create a suitable classroom atmosphere that conveys security, serenity and confidence.
    - Leave time for questions, and the possibility of asking them in private.
    - Never give details about the suicide attempt (for example, about the method or the location).
- ➢ Providing support and making referrals:
    - They will be given information about healthy strategies for managing emotions and negative feelings, and what they can do when a pupil is in this situation.
    - Institutional support. Pupils and teaching staff will be informed about the availability of help (on an individual and confidential basis) within the school and from healthcare services.
    - It is essential to make it very clear that the school will not tolerate any ridicule, nor will it shame or praise anyone who has attempted to take their own life or self-harm.

**Welcome back after an absence**

- ❖ In the event of a break in attendance, the student's return to the school will be discussed and agreed upon by the prevention team, the teaching staff, the medical team and the parents, considering the student's own wishes.
- ❖ The date of re-integration and any necessary support will be agreed.
- ❖ The pupil will be informed of the person they can turn to in a crisis or if they are feeling unwell. It is advisable that this is someone they trust most.

*Step 1. Approaching a conversation without imminent risk of suicide*

If there is no imminent risk of suicide or self-harm, but someone from the educational community (other pupils, school staff, family members, etc.) identifies or suspects a possible risk of suicide or self-harm, whether through direct communication from the pupil or another member of the educational community, the first thing to do is to talk to them about it.

*Step 2. Refer to the Educational and Psychological Counselling Service*

The intervention of the Educational and Psychological Counselling Service is essential to assess and address suicidal risk, both for the pupil who returns to the centre after healthcare professionals have intervened due to imminent risk or a suicide attempt, and for any pupil in whom suicidal risk has been detected or is suspected. If the pupil is a minor, in addition to

informing the Educational Counselling Service, their parents and/or legal guardians must be informed as soon as possible.

*Step 3. Risk assessment and analysis by the Educational Psychology Service*

The Educational Psychology Service will interview the pupil at potential risk of suicide or self-harm. In the interview or interviews with the student at risk of suicide or self-harm, it is important to identify the presence and intensity of risk and precipitating factors, as well as the presence, scarcity or weakness of protective factors.

*Step 4. Creation of the prevention team*

The prevention team will be created, which will be made up of programme management and the Educational and Psychological Counselling Service, as appropriate, with the authorisation of the student in question, together with other resources such as the family, the emergency contact, etc. The prevention team will be responsible for considering all the relevant risk and protective factors, and for deciding whether to contact the emergency contact provided by the pupil and at what point. In parallel with the creation of the prevention team, we will move on to step 5.

*Step 5. Development of the individualised prevention plan, the safety plan and third-party authorisation*

An individualised prevention plan will be created, which will be presented, agreed upon and started to be implemented together with the student The safety plan [1] is a very simple and useful tool for addressing suicide risk. It is a plan that is kept up to date and can be revised over time, and it can be created by the person at risk alone or with the help of a member of the educational community, a family member or another close person.

The involvement of others in addressing suicidal and self-harm risk is essential (for example, in helping to draw up the safety plan), but it requires the pupil's authorisation as to which people may or may not be involved in this process. To obtain this authorisation, the Annex to the Model Authorisation for the Disclosure of Information to Third Parties may be used.

Another key element in addressing suicide and self-harm risk is having specialist care from external services, primarily health services. For this, the pupil's authorisation for the transfer of information to these services is also required, as set out in the Annex of the Model authorisation form for third parties.

It is the specialised external services that will carry out the assessment and activate the corresponding protocols (for example, the Suicide Risk Code in Catalonia or the ARSUIC Code in the Community of Madrid), and will also make the appropriate referrals.

[1] A safety plan is a tool that identifies people, places, ideas, or actions that can help someone overcome their own suicidal thoughts or those of another person. Although it is usually designed for individuals at suicidal risk, it is also advisable for those who are supporting them to create their own safety plan, identifying their own contacts and strategies, which do not necessarily have to coincide with those of their close relative.
It is a fundamental tool for collaborative work between individuals at suicidal risk, their close relatives, and healthcare professionals, allowing them to address the basic strategies needed to confront and intervene in suicidal behavior.

*Step 6. Case monitoring by the prevention team*

Risk monitoring can be carried out using an observation and monitoring record, which will be for internal use only and will be completed by the Educational Psychology Service in conjunction with the prevention team. It may be shared as determined by the prevention team, based on the benefit it provides for the pupil's evolving suicidal and self-harm risk, and in accordance with the express authorisation contained in the pupil's authorisation form for third parties. If a significant risk is still assessed, monitoring must continue. If the prevention team does not assess a significant risk, proceed to step 7.

*Step 7. Closing and archiving the protocol*

If no significant risk is observed, close and archive the protocol:

- Periodic reviews of the case should be carried out to evaluate the actions taken and, where appropriate, proceed to close the protocol.

- It is recommended that the protocol remains active for at least the entire academic year in which it was initiated, but the school has the discretion to close the protocol if the pupil's situation has normalised.

- For cases that have arisen in the final term of the academic year, it will be considered whether to hold a welcome session at the start of the following academic year, as well as the need to maintain some of the measures detailed above in the individualised prevention plan.

- When transitioning between stages, it is important to facilitate the exchange of information and to continue, if necessary, with the measures required to protect the pupil.

- When making decisions regarding closure, provided the appropriate authorisation is in place, information must be gathered periodically on progress in the clinical (involved primary care and/or mental health services) and family domains, as well as from the educational environment (prevention team, coordination, teaching staff, etc.) and the pupil themselves.

***In the event of a new suicidal or self-harm risk, this protocol must be reactivated from step 3. Each suicide attempt must be assessed independently.***